



**Ministry of Health and
Long-Term Care**

**Inspection Report under
the Long-Term Care
Homes Act, 2007**

**Ministère de la Santé et des
Soins de longue durée**

**Rapport d'inspection sous la
Loi de 2007 sur les foyers de
soins de longue durée**

**Long-Term Care Homes Division
Long-Term Care Inspections Branch**

**Division des foyers de soins de
longue durée
Inspection de soins de longue durée**

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Report Date(s) / Date(s) du rapport	Inspection No / No de l'inspection	Log # / Registre no	Type of Inspection / Genre d'inspection
Aug 15, 2016	2016_263524_0024	008807-16	Complaint

Licensee/Titulaire de permis

S & R NURSING HOMES LTD.
265 NORTH FRONT STREET SUITE 200 SARNIA ON N7T 7X1

Long-Term Care Home/Foyer de soins de longue durée

HERON TERRACE LONG TERM CARE COMMUNITY
11550 McNorton Street WINDSOR ON N8P 1T9

Name of Inspector(s)/Nom de l'inspecteur ou des inspecteurs

INA REYNOLDS (524)

Inspection Summary/Résumé de l'inspection



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The purpose of this inspection was to conduct a Complaint inspection.

This inspection was conducted on the following date(s): July 25-29, 2016.

This complaint was related to dining and snack service.

During the course of the inspection, the inspector(s) spoke with the Administrator, the Food Service Manager, a Registered Practical Nurse, a Personal Support Worker and a family member.

The inspector also observed resident and staff interactions, observed a meal service, reviewed the complaint, procedures related to meal service, resident health records and policies and procedures related to this inspection.

**The following Inspection Protocols were used during this inspection:
Nutrition and Hydration**

During the course of this inspection, Non-Compliances were issued.

1 WN(s)

1 VPC(s)

0 CO(s)

0 DR(s)

0 WAO(s)



NON-COMPLIANCE / NON - RESPECT DES EXIGENCES

<p>Legend</p> <p>WN – Written Notification VPC – Voluntary Plan of Correction DR – Director Referral CO – Compliance Order WAO – Work and Activity Order</p>	<p>Legendé</p> <p>WN – Avis écrit VPC – Plan de redressement volontaire DR – Aiguillage au directeur CO – Ordre de conformité WAO – Ordres : travaux et activités</p>
<p>Non-compliance with requirements under the Long-Term Care Homes Act, 2007 (LTCHA) was found. (a requirement under the LTCHA includes the requirements contained in the items listed in the definition of "requirement under this Act" in subsection 2(1) of the LTCHA).</p> <p>The following constitutes written notification of non-compliance under paragraph 1 of section 152 of the LTCHA.</p>	<p>Le non-respect des exigences de la Loi de 2007 sur les foyers de soins de longue durée (LFSLD) a été constaté. (une exigence de la loi comprend les exigences qui font partie des éléments énumérés dans la définition de « exigence prévue par la présente loi », au paragraphe 2(1) de la LFSLD.</p> <p>Ce qui suit constitue un avis écrit de non-respect aux termes du paragraphe 1 de l'article 152 de la LFSLD.</p>

WN #1: The Licensee has failed to comply with LTCHA, 2007 S.O. 2007, c.8, s. 3. Residents' Bill of Rights

Specifically failed to comply with the following:

s. 3. (1) Every licensee of a long-term care home shall ensure that the following rights of residents are fully respected and promoted:

4. Every resident has the right to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs. 2007, c. 8, s. 3 (1).

Findings/Faits saillants :

1. The licensee has failed to ensure that every resident's right to be properly sheltered,



fed, clothed, groomed and cared for in a manner consistent with his or her needs were fully respected and promoted.

Review of an Infoline complaint submitted to the Ministry of Health and Long Term Care, identified that residents were denied tray service and eating in their room if residents were capable of going to the dining room for their meals.

Interview with a family member expressed concerns in regards to meal tray service not being provided to a resident in their room if the resident refused to come to the dining room for a meal. The resident would only receive a snack in the afternoon or evening.

Review of the MDS Quarterly review Resident Assessment Protocol (RAP) notes and the care plan for an identified resident indicated that the resident was identified at nutritional risk and often refused to come to the dining room for meals.

Review of the progress notes revealed the following examples:

- on a specific date and time, the resident's Power of Attorney (POA) approached a Registered Practical Nurse (RPN) while in the dining room. The POA stated that he/she would like a meal tray for the resident as the POA was there to assist the resident. The RPN informed the POA that meal trays were not to be given to residents when residents stay in their rooms and refused to come to the dining room, unless there was a significant change in status or for medical reasons.
- on a specific date and time, the resident refused to come to the dining room for supper. A Registered Practical Nurse (RPN) said to the resident that "a meal tray cannot be provided in room per home's policy".

In an interview with the Food Service Manager (FSM) on July 25 and 26, 2016, the FSM stated that if a family member requests a tray service it should be provided and that snacks are always available in the afternoon and evening. In an interview with the Administrator on July 25, 2016, the Administrator agreed that tray service may be available for residents and explained that the criteria for eligibility for tray service was outlined in the home's policy.

An identified resident, who was at nutritional risk, did not have their right to be properly fed and cared for in a manner consistent with their needs, fully respected and promoted when meals were not provided when the resident did not attend the dining room. [s. 3. (1) 4.]



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Additional Required Actions:

VPC - pursuant to the Long-Term Care Homes Act, 2007, S.O. 2007, c.8, s.152(2) the licensee is hereby requested to prepare a written plan of correction for achieving compliance to ensure that every resident's right to be properly sheltered, fed, clothed, groomed and cared for in a manner consistent with his or her needs are fully respected and promoted, to be implemented voluntarily.

Issued on this 9th day of September, 2016

Signature of Inspector(s)/Signature de l'inspecteur ou des inspecteurs

Original report signed by the inspector.